

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Steve Olson

Political Party (if applicable)

Republican

Office Sought

State Representative

District (if Senate or House)

83

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Kathy Bellings
SIGNATURE OF PERSON FILING REPORT

563-659-5175
TELEPHONE

11/01/07
DATE SIGNED

I AM FILING A July 19, 2006

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # 1

☒ CHECK IF AMENDMENT TO REPORT DATED 7/19/06

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

8,932.63

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) ("also see in-kind below")

6,900.00

Schedule P: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 15,832.63

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) ("also see debts and loans below")

1,091.68

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

14,740.95

**UNPAID BILLS (From Schedule D - Attach Schedule D)

326.40

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

258.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

0

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

| | |
|---|----------------------|
| FORM DR-2 (Rev. 12/2005) | DISCLOSURE REPORT |
| For Office Use Only | |
| Comm. # | 1387 |
| Logged In | |
| Scanned | |
| Computer | WKS |
| Audited | 3-13-08 e |
| File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th St. 1A Des Moines, Iowa 50319 Fax: 515-281-3701 | |

RECEIVED
NOV - 1 2007

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

| | |
|---|--------------------------|
| SCHEDULE D (Rev. 08/98) | INCURRED INDEBTEDNESS |
| <input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

| DATE INCURRED (MM/DD/YR) | NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED | DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED | BALANCE OWED AT CLOSE OF REPORTING PERIOD* |
|---|--|--|---|
| 6/1/06 - 7/14/06 | Steve Olson DeWitt, IA 52742 | 960 miles @ .34/mi | \$ 326.40 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| SUB-TOTAL | | | \$ 326.40 |
| TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD | | | \$ 326.40 |

RECEIVED
NOV - 2007
By _____

RECEIVED
NOV - 12007
By _____

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1
(for Schedule D)

CANDIDATE COMMITTEES NOTE:

"Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

7/19/06 report

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: ☐ 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
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 Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Steve Olson

Political Party (if applicable)

Republican

Office Sought

State Representative

District (if Senate or House)

83

FORM
DR-2

(Rev. 12/2005)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

File with:

Iowa Ethics and Campaign
 Disclosure Board
 510 E. 12th Ste. 1A
 Des Moines, Iowa 50319
 Fax: 515-281-3701

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Kathy Rollings
 SIGNATURE OF PERSON FILING REPORT

563-659-5175
 TELEPHONE

September 29, 2006
 DATE SIGNED

I AM FILING A July 19, 2006

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR

Indicate by # ☐ 1☒ CHECK IF AMENDMENT TO REPORT DATED 7/19/06

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
 which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 8,932.63

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

\$ 6,900.00

Schedule F: Loans Received total (Attach Schedule F)

\$ 0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

\$ 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 15,832.63

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below)

\$ 1,091.68

Schedule F: Loan Repayments total (Attach Schedule F)

\$ 0

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

\$ 14,740.95

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 0

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 258.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| | |
|--|--------------------------|
| SCHEDULE B (Rev. 07/03) | MONETARY EXPENDITURES |
| <input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

SEP 29 2006

| DATE EXPENDED (MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE | PURPOSE (DESCRIBE TRANSACTION) | AMOUNT EXPENDED |
|---------------------------------------|---|--|--|--------------------|
| 6/06/06 | ID# CK# 1067 | Sam's Club 3887 Elmore Avenue Davenport, Iowa | Campaign supplies for parades | \$ 218.07 |
| 06/15/06 | ID# CK# 1068 | VictoryStore.com 5200 S.W. 30th St Davenport, IA 52802 | Invitations + envelopes for fundraiser. | 790.61 |
| 06/27/06 | ID# CK# 1069 | Treasurer, State of Iowa State Capitol Building Des Moines, IA 50319 | Campaign supplies (US Flags and IA flags) | 83.00 |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| SUB-TOTAL | | | | \$ 1091.68 |
| TOTAL (If last page of this schedule) | | | | \$ 1091.68 |

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

SEP 29 2006

SCHEDULE

E

(Rev. 06/97)

IN-KIND

CONTRIBUTIONS

☒ CHECK THIS BOX IF
AMENDING FORM

| DATE RECEIVED (MM/DD/YR) | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE * (If applicable) | DESCRIPTION OF IN KIND CONTRIBUTION | ESTIMATED FAIR MARKET VALUE | ✓ IF FOR FUND-RAISER CONTRIBUTION |
|--------------------------|---|---|---|-----------------------------|-------------------------------------|
| 06/28/06 | Agribusiness Assn of Iowa PAC #6162 900 DesMoines Street Des Moines, IA 50309 | None | postage, food, beverages for PAC fundraiser | \$ 100.00 | <input checked="" type="checkbox"/> |
| 06/28/06 | Jill Altringer 104 NW Prairie Creek Drive Grimes, IA 60111 | None | food for PAC fundraiser | 25.00 | <input checked="" type="checkbox"/> |
| 7/6/06 | Republican Party of Iowa 621 E. 9th St Des Moines, IA 50309 | None | photo shoot | 133.00 | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |

SUB-TOTAL

\$

258.00

TOTAL (If last page of this schedule)

\$

258.00

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: 1(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
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Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY

Candidate Name

Steve Olson

Office Sought

State Representative

Political Party (if applicable)
RepublicanDistrict (if Senate or House)
83

FORM

DR-2

(Rev. 12/2005)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

File with:

Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-3701

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SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A July 19, 2006

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

Indicate by # 1☐ CHECK IF AMENDMENT TO REPORT DATED _____☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

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County & Local Committees, enter County in
which Election is held

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committee. This amount **MUST** be the same as the cash on hand at the end
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Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 15,832.63

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) ("also see debts and loans below")

1,091.68

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must
be zero) (Attach DR-3)

14,740.95

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 0

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 125.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO ☒

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE RECEIVED (MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE* (if applicable) | AMOUNT RECEIVED | ✓ IF FOR FUND-RAISER INCOME |
|--------------------------|--|---|--|-----------------|-----------------------------|
| 06/09/06 | ID# CK# | Eldon McAfee 300 School Street Des Moines, IA 50311 | None | \$100.00 | <input type="checkbox"/> |
| 06/09/06 | ID# CK# | Alice Srp 1403 3rd St Camanche, IA 52730 | None | 100.00 | <input type="checkbox"/> |
| 06/09/06 | ID# 8487 CK# 2525 | West Central PAC P.O. Box 68 Ralston, IA 51459 | None | 250.00 | <input type="checkbox"/> |
| 06/27/06 | ID# CK# | Patsy Neumeyer 4646 Spencers Grove Road Walker, IA 52352 | None | 50.00 | <input type="checkbox"/> |
| 06/27/06 | ID# CK# | J.C. Miller Box 535 Brooklyn, IA 52211-0535 | None | 100.00 | <input type="checkbox"/> |
| 06/27/06 | ID# CK# | Mona Rae Bond 2818 W. 1st Street Ankeny, IA 50021 | None | 200.00 | <input type="checkbox"/> |
| 06/27/06 | ID# CK# | Bradford J Manatt 1319 S. 12th Avenue W. Newton, IA 50208 | None | 500.00 | <input type="checkbox"/> |
| 06/27/06 | ID# CK# | Jo Ann H. Manatt 408 West 2nd Ave. Brooklyn, IA 52211 | None | 500.00 | <input type="checkbox"/> |
| 06/27/06 | ID# CK# | Curt Manatt 7230 Hyperion Pointe Johnston, IA 50131 | None | 500.00 | <input type="checkbox"/> |
| 06/27/06 | ID# CK# | Anthony Manatt P.O. Box 186 DeWitt, IA 52742 | None | 500.00 | <input type="checkbox"/> |

SUB-TOTAL

\$ 2800.00

TOTAL (If last page of this schedule)

\$

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Page 1 of 3
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

| | |
|---|------------------------------------|
| SCHEDULE A (Rev. 07/03) | MONETARY RECEIPTS |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE RECEIVED (MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE* (if applicable) | AMOUNT RECEIVED | ✓ IF FOR FUND-RAISER INCOME |
|--------------------------|--|---|--|-----------------|-------------------------------------|
| ✓ 06/30/06 | ID# 6351 CK# 1077 | Petro Marketers & Conv Stores of Ia 1303 50th West Des Moines, IA 50266 | None | \$500.00 | <input checked="" type="checkbox"/> |
| ✓ 06/30/06 | ID# 6430 CK# 1397 | Iowa Rural Water State PAC 4221 S. 22nd Ave E Newton, IA 50208 | None | 50.00 | <input checked="" type="checkbox"/> |
| ✓ 06/30/06 | ID# 6237 CK# 1818 | ABATEPAC PAC #6237 3118 Eastern Ave NE Cedar Rapids, IA 52402 | None | 150.00 | <input checked="" type="checkbox"/> |
| ✓ 06/30/06 | ID# 1387 6052 CK# 3017 | Independent Insurance Agents of Iowa 4000 Westown Pky, Ste 200 West Des Moines, IA 50265 | None | 150.00 | <input checked="" type="checkbox"/> |
| ✓ 06/30/06 | ID# 6096 CK# 1934 | Manufactured Housing PAC #6096 1400 Dean Ave Des Moines, IA 50316-3938 | None | 200.00 | <input checked="" type="checkbox"/> |
| ✓ 06/30/06 | ID# 8251 CK# 1650 | Prinpac 711 High Street Des Moines, Iowa 50392 | None | 300.00 | <input checked="" type="checkbox"/> |
| ✓ 06/30/06 | ID# 6059 CK# 2770 | Iowa Committee of Automotive Retailers 1111 Office Park Rd. West Des Moines, IA 50265 | None | 150.00 | <input checked="" type="checkbox"/> |
| ✓ 06/30/06 | ID# 6118 CK# 2312 | Iowa Optometric Assoc PAC #6118 1454 30th Street, Ste. 204 West Des Moines, IA 50266 | None | 200.00 | <input checked="" type="checkbox"/> |
| ✓ 06/30/06 | ID# 4387 6064 CK# 1989 | Iowa F.O.R.E. Friends of Rural Electric 8525 Douglas Ave. Suite 48 Des Moines, IA 50322 | None | 100.00 | <input checked="" type="checkbox"/> |
| ✓ 06/30/06 | ID# 6058 CK# 2812 | Iowa Chiropractic Society PAC #6058 1605 N. Ankeny Blvd., Suite 100 Ankeny, IA 50021-4159 | None | 100.00 | <input checked="" type="checkbox"/> |

SUB-TOTAL

\$ 1900.00

TOTAL (If last page of this schedule)

\$

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Page 2 of 3
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

SCHEDULE**A**

(Rev. 07/03)

MONEY RECEIPTS☐ CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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| DATE RECEIVED (MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE* (if applicable) | AMOUNT RECEIVED | ✓ IF FOR FUND-RAISER INCOME |
|--------------------------|--|---|--|-----------------|-----------------------------|
| 07/12/06 | ID# 6056 CK# 3487 | Bankers Unite in Legislative Decisions 8800 NW 62nd Ave Johnston, IA 50131-6200 | None | \$1000.00 | <input type="checkbox"/> |
| 07/12/06 | ID# CK# | Kenneth D. Rohling 2125 130th Avenue Wheatland, IA 52777 | None | 50.00 | <input type="checkbox"/> |
| 07/12/06 | ID# CK# | Alan Tubbs 1300 Scenic Hill Lane DeWitt, IA 52742 | None | 100.00 | <input type="checkbox"/> |
| 07/12/06 | ID# CK# | Carl J. Rushck 2217 St. Andrews Circle Bettendorf, IA 52722 | None | 200.00 | <input type="checkbox"/> |
| 07/12/06 | ID# CK# | Bill Wallace 665 Mississippi Blvd Bettendorf, IA 52722 | None | 250.00 | <input type="checkbox"/> |
| 07/12/06 | ID# CK# | Larry C Henson 1929 Cromwell Circle Davenport, IA 52807 | None | 500.00 | <input type="checkbox"/> |
| | ID# CK# | Unitemized Contributions | None | 100.00 | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |

SUB-TOTAL

\$ 2200.00

TOTAL (if last page of this schedule)

\$ 6900.00

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Page 3 of 3
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

B

(Rev. 07/03)

MONETARY

EXPENDITURES

CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

| DATE EXPENDED (MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE | PURPOSE (DESCRIBE TRANSACTION) | AMOUNT EXPENDED |
|---------------------------------------|---|--|--|--------------------|
| 6/06/06 | ID# CK# 1067 | Sam's Club 3887 Elmore Avenue Davenport, Iowa | Campaign supplies for parades | \$ 218.07 |
| 06/15/06 | ID# CK# 1068 | VictoryStore.com 5200 S.W. 30th St Davenport, IA 52802 | Campaign supplies | 790.61 |
| 06/27/06 | ID# CK# 1069 | Treasurer, State of Iowa State Capitol Building Des Moines, IA 50319 | Campaign supplies (US Flags and IA flags) | 83.00 |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | See amended page | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| SUB-TOTAL | | | | \$ 1091.68 |
| TOTAL (if last page of this schedule) | | | | \$ 1091.68 |

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

SCHEDULE

E

(Rev. 06/97)

IN-KIND
CONTRIBUTIONS☐ CHECK THIS BOX IF
AMENDING FORM

| DATE RECEIVED (MM/DD/YR) | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE * (if applicable) | DESCRIPTION OF IN KIND CONTRIBUTION | ESTIMATED FAIR MARKET VALUE | ✓ IF FOR FUND-RAISER CONTRIBUTION |
|--------------------------------|--|---|---|-----------------------------------|---|
| 06/28/06 | Agribusiness Assn of Iowa PAC #6162 900 Dcs Moines Street Des Moines, IA 50309 | None | postage, food, beverages for PAC fundraiser | \$ 100.00 | <input checked="" type="checkbox"/> |
| 06/28/06 | Jill Altringer 104 NW Prairie Creek Drive Grimes, IA 60111 | None | food for PAC fundraiser | 25.00 | <input checked="" type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
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| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |

SUB-TOTAL

\$ 125.00

TOTAL (if last
page of this
schedule)

\$ 125.00

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)